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TRACING THE SOURCES AND LIMITING THE SPREAD OF INFANTILE PARALYSIS

SECOND PAPER

By CHARLOTTE TALLEY, R.N.

Montclair, New Jersey

"Blease, blease do something," pleaded a Polish mother hysterically, clasping her hands in supplication, her mouth quivering. "They took my boy to 'ospital and see," showing the bathtub full of soiled clothing, "here are all the clothes from the sickness and no water to wash 'em. Landlady say she get plumber today. She gets no one. And look," ushering the nurse who was at work on a special investigation of infantile paralysis into the front room, where four dirty children were sliding down mattresses, "I can't wash the childer and they have no clean clothes."

This poor woman had been actually unable to get water to wash with for two or three days under these conditions and she did not know how to obtain any. This case was telephoned immediately to headquarters so that the Board of Health might be notified at once.

Here is one instance of the value of certain follow-up work of research and relief which was carried on during the summer under the general direction of the Board of Health. From twenty to forty nurses and several doctors were sent out six days a week to all sections of Greater New York from the Department of Health in Brooklyn to gather statistics, trace the sources and results of infection, and report all suspected cases and violations of quarantine; incidentally this was a campaign of education both for the inspectors and the suspected.

All cases of "polio" which had been reported to the Board of Health and quarantined or removed to the hospital were turned over to the nurses who visited the home of the patients, to investigate conditions there and in adjacent houses. The doctors subsequently called to diagnose suspicious cases and report all true ones. Data were obtained by the nurses to determine what persons as to race, nationality, class, and physical condition, are most susceptible to the disease. The results of the special investigation have not been made public as yet.

In investigating the possible sources of the disease, personal contact with any illness was traced, the food supply was inquired into, and sanitary conditions noted.

In some instances a child had apparently contracted the disease from a brother or sister, often a child who had had a very light case (abortive) with no paralysis. Sometimes there had been contact with other children who had also been stricken or with their brothers or sisters. Occasionally there were cases in the neighborhood with which there had been no known contact. One exceptional case was where four out of five children in one family had the disease, because no matter how large the family, as a rule only one or two children in it contract "polio." These patients had not been separated soon enough to prevent catching it one from another and the mystery here was as to the initial infection. These children lived in a private house where they had been isolated since the outbreak of the epidemic, playing only in their own yard and with no other children. They had eaten no food from the stores, only vegetables from their own garden, and home-made bread and cake, and they had been given no milk except condensed milk. Sanitary conditions in the home were good. There was a case of paralysis across the street, however, and a few flies, only one or two, were seen in each house. Here would seem to be the way the disease had been imported.

Some children had slept with brothers or sisters and had drunk from the same glasses with them while they had fever, without contracting the disease, but many new cases or cases of suspicious illness were discovered to have been in contact with the original case. Such cases were telephoned in at once for investigation to avoid any further infection.

Where there had been no personal contact with other cases there was generally some possible food infection. Dipped milk had been given a baby from a none-too-clean store, or unpeeled, unwashed fruit had been eaten. So many cases occurred in one section of Long Island City in the families of patrons of a certain store, that when it was found that there had been a case of "polio" in the storekeeper's family this store was closed and its business suspended entirely. One mother insisted that there had been no possible contact or food infection with respect to her sick little girl. She said she avoided trading at an untidy store next door and to inquiries as to the bakery she traded at, she declared that it was very clean as all the food was kept in glass cases. Her little boy said, "Sister bought cakes there." When this store was visited the owner was absent, one glass door to the case was open, and there were several flies on the cakes. Safety evidently lies in having no flies in our homes or in giving them no access to any of the food we eat.

Paralysis had visited the cleaner homes as often as those where

carelessness prevailed, and the dirtiest children seemed often to be so accustomed to all species of germs as to be immune to the virus of "polio." Nevertheless there was generally some unsanitary condition in the neighborhood of the better home which might have been responsible for the infection. Isn't it natural to suppose that some such epidemic as infantile paralysis might develop if garbage is left to rot for hours in the sun in hot weather, if sewers overflow and back up into cellars or plumbing defects are neglected? Many cases of paralysis occurred in the outlying districts of the city where there were trees, flowers, green grass, and a general country atmosphere; but also there were overflowing cesspools and trash heap or other menaces to health.

It was interesting to note that when a house was visited where the quarantine was about to be lifted, the tenants reported great improvement in sanitary conditions since the illness occurred. The building was kept cleaner, tenants no longer threw garbage into the court, garbage collections were made more promptly, rooms had been renovated and cellars had been whitewashed.

Quarantine regulations, the nonobservance of which was reported, concerned the proper placarding of the houses, isolation or removal of the patient, screening of the sick room, isolation of attendant and of children in the family who had been exposed, and the isolation of food handlers.

A red and white placard announcing the illness was placed by the Board of Health upon the street door, the flat door, and the sick room door, in all tenements containing a case of "polio" and on the street door and room door of all private houses. Generally there was no infraction of this rule, in spite of the fact that occasionally tenants moved away when the sign went up and that it prevented the renting of any vacant flats in a house. Later, in a case which was brought into court, a decision was rendered that a sign on the street door is not necessary as persons merely passing through a building in which there is a case of paralysis are not exposed to it.

If a placard had been removed, the landlord generally made some ingenious excuse, such as that the rain had washed it away or that the children must have removed it. In one case a newspaper had been tacked over the placard on the floor of a flat and the tenant explained that the sick child had been removed to the hospital and that the painter who had been sent for to paint and paper the rooms would not come in if he saw the sign.

It was always important to report the non-removal of a patient, for it was possible when people said that a child was going to be taken to the hospital that day or the next, that there might be some mistake.

A dramatic scene occurred between a Russian Jewish mother and her Italian landlady. The former was fighting to keep her sick little boy in the house, and she was paying a nurse to stay on the top floor with him while she kept a fancy goods store on the first floor, where she lived. "Believe me I am not glad to have this trouble," said the distressed mother. "You should give me another room. I will pay for it and what more do you want? You've had a child, so you must know how I feel. Only let me keep my child here and God will bless you." After much lively discussion, the Italian woman finally gave in; not apparently for lack of pluck to hold her own but because her heart responded to the mother's appeal. If she had not permitted the use of another room, the child would have been taken to the hospital because of defective quarantine as the attendant is not allowed to sleep in the same room with a patient ill with poliomyelitis.

After the removal of a case of infantile paralysis, other children in the family are expected to keep to their own flat for two weeks. They don't always do this. Joseph Disibito didn't. His brother went and dragged him away from the midst of a group of children in the street and carried him screaming and kicking into his flat. The mother had gone out to get food for her brood of six and when she came in she whipped Joseph with a cat-of-nine-tails which he in his rage seized from her hand and tried to use on her. Poor little boy, after a fit of sobbing he promised he wouldn't run away again. The six active children in this family were crowded into one small room while the other rooms were being papered and painted.

In a tenement where there were thirty-six families a funeral occurred while a nurse-inspector was looking for a certain number in the neighborhood. A crowd had gathered around the hearse as a little white coffin was taken out. Inquiry as to the cause of the child's death revealed a probable case of "polio" which had not been seen by a physician and which the parents called stomach trouble. There were fifty children in this house, most of whom had come in contact with the children in the afflicted family.

A new case which seemed to be a contact case for an original one revealed a pathetic circumstance. A little girl of nine had died of paralysis after a few days of great suffering. She had been a beautiful, bright, lovable child, the pride of the household. She had played with only the children in her immediate neighborhood. Questioned carefully as to any illness in the vicinity the mother said, "Oh, Jennie played with the little boy next door. He isn't well, but he never has been. He hasn't paralysis." But this little boy, a sub-normal child physically and a mental defective, had evidently had an abortive case

and recovered. Where was God? It is difficult to understand how such things are permitted by Providence to occur. Evidently human intelligence is expected to work out this serious problem in order to prevent such disasters.

Infantile paralysis is no respecter of individuals as regards physical condition, as the child in apparently perfect health is attacked, as well as the delicate child. The separating of family groups of children during such an epidemic is certainly important, yet two weeks is a long time for active children to be confined within a few rooms. This is itself a danger to health, and not only quarantined children were kept in during the epidemic but others, too, as a preventive measure.

A plan is being formulated for utilizing the roofs of buildings in New York during the summer months which would be beneficial during an epidemic of paralysis. It would at least keep the children from mingling in the streets with children from other tenements and would give them freedom to play where it is clean. Let us hope this idea will be carried out before we have another such epidemic, if we must have another, so that poor children may have greater opportunity to play safely and happily instead of being subjected to the danger of infection in the streets or cooped up with their minds fixed on the chance of contracting so terrifying a disease.

Death after acute suffering, or a crippled existence, for so many innocent little children shakes our faith in Eternal Justice and renews it only through a strengthened belief in the continuance of these same lives either here or elsewhere to a happier issue.

TOO LATE FOR CLASSIFICATION

The New Jersey State Board of Examiners of Nurses will hold examinations for graduate nurses on December 5, 1916 in the State House, Trenton.

Applications must be filed fifteen days prior to December 5, 1916. Information and application blanks can be procured of the Secretary Treasurer, Jennie M. Shaw, 139 North 12th Street, Newark, N. J.